

**IN THE UNITED STATES DISTRICT COURT  
FOR THE SOUTHERN DISTRICT OF NEW YORK**

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**CENTURY INDEMNITY COMPANY, AS  
SUCCESSOR TO CCI INSURANCE  
COMPANY, AS SUCCESSOR TO  
INSURANCE COMPANY OF NORTH  
AMERICA and THE CONTINENTAL  
INSURANCE COMPANY**

Plaintiffs,

versus

CIVIL ACTION NO. 08 CV 02012

**FREEPORT-MCMORAN COPPER &  
GOLD INC., AS THE CLAIMED  
SUCCESSOR TO PHELPS DODGE  
CORPORATION, AS THE CLAIMED  
SUCCESSOR TO CYPRUS AMAX  
MINERALS COMPANY, AS THE  
CLAIMED SUCCESSOR TO AMAX,  
INC. AND AMAX METALS RECOVERY,  
INC., AS SUCCESSOR TO AMERICAN  
METAL CLIMAX, INC.**

Defendant.

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**AFFIDAVIT OF ROBERT GALARDI**

I, Robert Galardi being of lawful age and having been duly sworn, state the following:

1. I make this affidavit based on personal knowledge pursuant to Rule 56 of the Federal Rules of Civil Procedure.
2. I am a Claim Specialist for the Environmental and Mass Tort Claims Department of The Continental Insurance Company ("Continental").
3. Attached as Exhibit A is a true and correct copy of the declarations page of insurance policy L-3320862. The declarations page indicates policy L-3320862 was issued, effective January 1, 1975 to January 1, 1976, by The Continental Insurance Company to Amax,

Inc. The declarations page indicates The Continental Insurance Company was located in New York, New York, that the broker of the policy, Frenkel & Co., was located in New York, New York, and that Amax, Inc. was located in New York, New York.

4. Attached as Exhibit B is a true and correct copy of the declarations page of insurance policy L-3618826. The declarations page indicates policy L-3618826 was issued, effective January 1, 1976 to January 1, 1977, by The Continental Insurance Company to Amax, Inc. The declarations page indicates The Continental Insurance Company was located in New York, New York, that the broker of the policy, Frenkel & Co., was located in New York, New York, and that Amax, Inc. was located in New York, New York.

5. Attached as Exhibit C is a true and correct copy of the declarations page of insurance policy L-1184328. The declarations page indicates policy L-1184328 was issued, effective January 1, 1977 to January 1, 1978, by The Continental Insurance Company to Amax, Inc. It appears the effective period of policy L-1184328 was later extended to January 1, 1980. The declarations page indicates The Continental Insurance Company was located in New York, New York, that the broker of the policy, Frenkel & Co., was located in New York, New York, and that Amax, Inc. was located in Greenwich, Connecticut.

6. Attached as Exhibit D is a true and correct copy of a daily report for insurance policy SRL 3635913. The daily report indicates policy SRL 3635913 was issued, effective January 1, 1980 to January 1, 1981, by The Continental Insurance Company to Amax, Inc. The daily report indicates The Continental Insurance Company was located in New York, New York, that the broker of the policy, Frenkel & Co., was located in New York, New York, and that Amax, Inc. was located in Greenwich, Connecticut.

7. Attached as Exhibit E is a true and correct copy of the declarations page of insurance policy SRL 3636099. The declarations page indicates policy SRL 3636099 was issued, effective January 1, 1981 to January 1, 1982, by The Continental Insurance Company to Amax, Inc. The declarations page indicates The Continental Insurance Company was located in New York, New York, that the broker of the policy, Frenkel & Co., was located in New York, New York, and that Amax, Inc. was located in Greenwich, Connecticut.

8. Attached as Exhibit F is a true and correct copy of the declarations page of insurance policy SRL 3636291. The declarations page indicates policy SRL 3636291 was issued, effective January 1, 1982 to January 1, 1983, by The Continental Insurance Company to Amax, Inc. The declarations page indicates The Continental Insurance Company was located in New York, New York, that the broker of the policy, Frenkel & Co., was located in New York, New York, and that Amax, Inc. was located in Greenwich, Connecticut.

9. Attached as Exhibit G is a true and correct copy of the declarations page of insurance policy SRL 3636677. The declarations page indicates policy SRL 3636677 was issued, effective January 1, 1983 to January 1, 1984, by The Continental Insurance Company to Amax, Inc. The declarations page indicates The Continental Insurance Company was located in New York, New York, that the broker of the policy, Frenkel & Co., was located in New York, New York, and that Amax, Inc. was located in Greenwich, Connecticut.

10. Attached as Exhibit H is a true and correct copy of the declarations page of insurance policy SRL 3636859. The declarations page indicates policy SRL 3636859 was issued, effective January 1, 1984 to January 1, 1985, by The Continental Insurance Company to Amax, Inc. The declarations page indicates The Continental Insurance Company was located in

New York, New York, that the broker of the policy, Frenkel & Co., was located in New York, New York, and that Amax, Inc. was located in Greenwich, Connecticut.

11. Attached as Exhibit I is a true and correct copy of the declarations page of insurance policy SRL 3344412. The declarations page indicates policy SRL 3344412 was issued, effective January 1, 1985 to January 1, 1986, by The Continental Insurance Company to Amax, Inc. The declarations page indicates The Continental Insurance Company was located in New York, New York, that the broker of the policy, Frenkel & Co., was located in New York, New York, and that Amax, Inc. was located in Greenwich, Connecticut.

12. Attached as Exhibit J is a true and correct copy of the declarations page of insurance policy SRL 3347418. The declarations page indicates policy SRL 3347418 was issued, effective January 1, 1986 to April 1, 1986, by The Continental Insurance Company to Amax, Inc. The declarations page indicates The Continental Insurance Company was located in New York, New York, that the broker of the policy, Frenkel & Co., was located in New York, New York, and that Amax, Inc. was located in Greenwich, Connecticut.

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FURTHER AFFIANT SAITH NOT.

I affirm under the penalties for perjury that the foregoing is true and accurate to the best of my knowledge and belief.

Robert Galardi  
Robert Galardi

STATE OF NEW JERSEY )  
 ) SS:  
COUNTY OF Middlesex )

Personally appeared before me, a Notary Public, in and for said County and State, Robert Galardi, who acknowledges the foregoing statements to be true and correct to the best of his knowledge and belief.

Subscribed and sworn to on this 6<sup>th</sup> day of June 2008.

Mary Ann Galayda  
Notary Public

My Commission Expires:

Printed: **MARY ANN GALAYDA**  
**NOTARY PUBLIC**  
**STATE OF NEW JERSEY**  
No. 2057282  
MY COMMISSION EXPIRES MARCH 10, 2009

# EXHIBIT A

**ROBERT GALARDI AFFIDAVIT IN SUPPORT OF THE CONTINENTAL INSURANCE COMPANY'S  
RESPONSE IN OPPOSITION TO FREEPORT-MCMORAN COPPER & GOLD, INC.'S MOTION TO  
DISMISS OR STAY THIS ACTION**

***CENTURY INDEMNITY COMPANY, ET AL., VS. FREEPORT-MCMORAN COPPER & GOLD INC., ET  
AL.***

**IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF NEW YORK  
CIVIL ACTION NO. 08 CV 02012**

CBM-IPG\SF407339.1

Producer  
Frenkel & Co.  
156 William Street  
New York City, N. Y. 10038  
Code No. 81 521 056

Policy No. I 3 32 OF 12

**CONFIDENTIAL**

The Continental Insurance Company  
(A Stock Company Organized 1853)  
80 Maiden Lane, New York, New York 10038

(A Stock Company herein called the Company)

Agrees with the Named Insured, in consideration of the payment of the premium and subject to the declarations following, to provide Insurance as hereinafter set forth, subject to all the terms of this policy as follows:

Blanket Liability Policy

Declarations

Item I  
Named Insured: Amax Inc., And As Schedule A Attached

Item II  
Address: 1270 Avenue Of The Americas  
New York, New York

Item III - Policy Period: From: January 1, 1975  
To: January 1, 1976  
12:01 A. M. Standard Time, at the  
Address of the Named Insured as  
stated herein as to both of said  
dates.

Item IV - Limits of Liability

Coverage A

Personal Injury Liability \$1,000,000 Each Occurrence  
\$1,000,000 Aggregate Products

Coverage B

Property Damage Liability \$100,000 Each Occurrence  
\$100,000 Aggregate Products

— The CONTINENTAL INSURANCE COMPANIES —

AX 0000905

# EXHIBIT B

**ROBERT GALARDI AFFIDAVIT IN SUPPORT OF THE CONTINENTAL INSURANCE COMPANY'S  
RESPONSE IN OPPOSITION TO FREEPORT-MCMORAN COPPER & GOLD, INC.'S MOTION TO  
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***CENTURY INDEMNITY COMPANY, ET AL., VS. FREEPORT-MCMORAN COPPER & GOLD INC., ET  
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**IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF NEW YORK  
CIVIL ACTION NO. 08 CV 02012**

CBM-IPG\SF407339.1



Producer  
Frenkel & Company, Inc.  
156 William Street  
New York, N. Y. 10038  
Code No. 81 980 021

Policy No. L-3 61 88 26

**CONFIDENTIAL**

THE CONTINENTAL INSURANCE COMPANY  
(A Stock Company Organized 1853)  
80 Maiden Lane, New York, New York 10038

(A Stock Company Herein Called The Company)

Agrees with the Named Insured, in consideration of the payment of the premium and subject to the declarations following, to provide Insurance as hereinafter set forth, subject to all the terms of this policy as follows:

**BLANKET LIABILITY POLICY****DECLARATIONS**

Item I  
Named Insured: AMAX, Inc., And As per Schedule "A" Attached

Item II  
Address: 1270 Avenue Of The Americas  
New York, New York

Item III  
Policy Period: From: January 1, 1976  
To: January 1, 1977  
12:01 A. M. Standard Time, at the  
Address of the Named Insured as  
Stated herein as to both of said  
Dates.

**Item IV - Limits of Liability****Coverage A**

Personal Injury Liability \$1,000,000 Each Occurrence  
\$1,000,000 Aggregate

**Coverage B**

Property Damage Liability \$250,000 Each Occurrence  
\$250,000 Aggregate Products  
\$500,000 Aggregate All Other  
Property Damage  
Coverage

Guaranty Fund \$36.00

The CONTINENTAL INSURANCE COMPANIES**AT 00000000**

# EXHIBIT C

**ROBERT GALARDI AFFIDAVIT IN SUPPORT OF THE CONTINENTAL INSURANCE COMPANY'S  
RESPONSE IN OPPOSITION TO FREEPORT-MCMORAN COPPER & GOLD, INC.'S MOTION TO  
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AL.***

**IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF NEW YORK  
CIVIL ACTION NO. 08 CV 02012**

CBM-IPG\SF407339.1

Producer  
Frenkel & Company, Inc.  
156 William Street  
New York, N.Y. 10038  
Code No. 81 980 021

Policy No. L1 18 43 28

THE CONTINENTAL INSURANCE COMPANY  
(A Stock Company Organized 1853)  
80 Maiden Lane, New York, New York 10038

(A Stock Company Herein Called The Company)

Agrees with the Named Insured, in consideration of the payment of the premium and subject to the declarations following, to provide Insurance as hereinafter set forth, subject to all the terms of this policy as follows:

BLANKET LIABILITY POLICY

DECLARATIONS

Item I

Named Insured: AMAX, Inc., And As per Schedule "A" Attached

Item II

Address: AMAX CENTER  
GREENWICH, CONNECTICUT, 06830

Item III

Policy Period: From: January 1, 1977  
To: January 1, 1978  
12:01 A.M. Standard Time, at the  
Address of the Named Insured as  
Stated herein as to both of said  
Dates.

Item IV - Limits of Liability

Coverage A

Personal Injury Liability \$1,000,000 Each Occurrence  
\$1,000,000 Aggregate

Coverage B

Property Damage Liability \$250,000 Each Occurrence  
\$250,000 Aggregate Products  
\$1,000,000 Aggregate All  
Other  
Property Damage  
Coverage

Guaranty Fund \$408.00

The CONTINENTAL INSURANCE COMPANIES

# EXHIBIT D

**ROBERT GALARDI AFFIDAVIT IN SUPPORT OF THE CONTINENTAL INSURANCE COMPANY'S  
RESPONSE IN OPPOSITION TO FREEPORT-MCMORAN COPPER & GOLD, INC.'S MOTION TO  
DISMISS OR STAY THIS ACTION**

***CENTURY INDEMNITY COMPANY, ET AL., VS. FREEPORT-MCMORAN COPPER & GOLD INC., ET  
AL.***

**IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF NEW YORK  
CIVIL ACTION NO. 08 CV 02012**

CBM-IPG/SF407339.1

(Dirty copy)

The Continental Insurance Company  
80 Maiden Lane  
New York, N.Y. 10038

11

Company  
Code

Policy No **SRL**

3 63 59 13

Renewal of:

**L 1184328**

**Frenkel & Company Inc.**  
125 William Street  
New York, N.Y. 10038

81 980 021

Producer's  
Name  
and Code

**AMAX, Inc. & As Per  
Schedule A Attached  
Amax Center  
Greenwich, Conn. 06830**

**Named  
Insured  
and Address**

The named insured is:  
 Individual ☐ Partnership ☐ Corporation ☒  
 Joint Venture ☐  
 Other (specify) \_\_\_\_\_

**Business of the named insured is:**

Item 2. From **12:01a** **1-1-80** to **1-1-81**  
Policy Period: (Hour and Minute)  
**12:01 A.M.**, standard time at the address of the named insured as stated herein.  
Audit Period: **MO. 2/13/80**  
Annual, unless otherwise stated.

**Audit Required**  
☒ Yes    ☐ No

Item 3. The insurance afforded is only with respect to such of the following Coverage Parts as are indicated by specific premium charge or charges.

Coverage Parts	Advance Premiums
Basic Automobile Liability Insurance	\$
Comprehensive Automobile Liability Insurance	\$
Automobile Medical Payments Insurance	\$
Garage Insurance	\$
Uninsured Motorists Insurance	\$
Automobile Physical Damage Insurance	\$
Automobile Physical Damage Insurance (Dealers)	\$
	\$
	\$
	\$
Comprehensive General Liability Insurance	\$ 906,627
Owners', Landlords' and Tenants' Liability Insurance	\$
Manufacturers' and Contractors' Liability Insurance	\$
Comprehensive Personal Insurance	\$
Farmer's Comprehensive Personal Insurance	\$
Contractual Liability Insurance	\$
Premises Medical Payments Insurance	\$
Owners' and Contractors' Protective Liability Insurance	\$
Personal Injury Liability Insurance	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total Advance Premium for this policy	\$ 906,627

Form numbers of endorsements forming a part of the policy on its effective date:

**L7251 (2)**

Sum is payable: On effective date of policy \$ \_\_\_\_\_ ; 1st Anniversary \$ \_\_\_\_\_ ; 2nd Anniversary \$ \_\_\_\_\_

Countersigned by\_

# EXHIBIT E

**ROBERT GALARDI AFFIDAVIT IN SUPPORT OF THE CONTINENTAL INSURANCE COMPANY'S  
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AL.***

**IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF NEW YORK  
CIVIL ACTION NO. 08 CV 02012**

CBM-IPG/SF407339.1

Policy  
Issued By

The Continental Insurance Company  
80 Maiden Lane  
New York, NY 10038

11

A STOCK COMPANY

Policy No. SRL

3 63 60 99

Producer's  
Name

Frenkel & Co., Inc.  
123 William Street  
New York, NY 10038

99 913 659

Producer's  
Code

Renewal of:

SRL 3635913

Item 1.  
Named  
Insured  
and Address  
(Number and  
Street, Town or  
City, County  
and State)

Amax Inc. & As Per Schedule A Attached  
Amax Center  
Greenwich Conn. 06830

The named insured is:  
Individual ☐ Partnership ☐ Corporation ☒  
Joint Venture ☐  
Other (specify)

Business of the named insured is:

Mining, Smelting &amp; Refining

Item 2.  
Policy  
Period:

From 12:01A M., 1/1/81 to 1/1/82

12:01 A.M., standard time at the address of the named insured as stated herein.

Audit  
Period:

Annual, unless otherwise stated.

Audit Required

☒ Yes ☐ No

### LIABILITY INSURANCE POLICY - SECTION TWO - DECLARATIONS

(For Automobile Insurance or General Liability Insurance separately or combined)

Item 3. The insurance afforded is only with respect to such of the following Coverage Parts as are indicated by specific premium charge or charges.

Coverage Parts	Advance Premiums
Basic Automobile Liability Insurance	\$
Comprehensive Automobile Liability Insurance	\$
Automobile Medical Payments Insurance	\$
Garage Insurance	\$
Uninsured Motorists Insurance	\$
Automobile Physical Damage Insurance	\$
Automobile Physical Damage Insurance (Dealers)	\$
	\$
	\$
	\$
Comprehensive General Liability Insurance	\$ 1,254,000
Owners', Landlords' and Tenants' Liability Insurance	\$
Manufacturers' and Contractors' Liability Insurance	\$
Comprehensive Personal Insurance	\$
Farmer's Comprehensive Personal Insurance	\$
Contractual Liability Insurance	\$
Premises Medical Payments Insurance	\$
Owners' and Contractors' Protective Liability Insurance	\$
Personal Injury Liability Insurance	\$
	\$
	\$
	\$
	\$
	\$
Deposit Premium	\$ 663,240
Total Advance Premium for this policy	\$ see end't #1
Form numbers of endorsements forming a part of the policy on its effective date:	

Premium is payable: On effective date of policy \$

; 1st Anniversary \$

; 2nd Anniversary \$

This declaration page shall not be binding on the company unless countersigned by a duly authorized representative of the company, and attached, with the policy, to Section One of the company's Liability Insurance Policy, and completed by one or more Coverage Parts for which there is an advance premium indicated on this page.

Countersigned by

*G. Paragon*

# EXHIBIT F

**ROBERT GALARDI AFFIDAVIT IN SUPPORT OF THE CONTINENTAL INSURANCE COMPANY'S  
RESPONSE IN OPPOSITION TO FREEPORT-MCMORAN COPPER & GOLD, INC.'S MOTION TO  
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CBM-IPG\SF407339.1



80 Maiden Lane  
N.Y. York, NY 10038

11

3 63 62 91

Frenkel & Co., Inc.  
123 William Street  
New York, NY 10038

99 913 659

Producer's  
Code

Renewal of.

SRL 3636099

Amax Inc. & As Per Schedule A Attached  
Amax Center  
Greenwich Conn. 06830

The named insured is: Individual ☐; Partnership ☐; Corporation ☒;  
Joint Venture ☐;  
Other (specify) Mining, Smelting & Refining  
Business of the named insured is:

2. From 12:01A. M., 1/1/82 to 1/1/83  
1. (Hour and Minute)  
12:01 A.M., standard time at the address of the named insured as stated herein.  
it  
d: Annual, unless otherwise stated.

**Audit Required**  
☒ Yes      ☐ No

**LIABILITY INSURANCE POLICY - SECTION TWO - DECLARATIONS**  
(For Automobile Insurance or General Liability Insurance separately or combined)

3. The insurance afforded is only with respect to such of the following Coverage Parts as are indicated by specific premium charge or charges.

Coverage Parts	Advance Premiums
Basic Automobile Liability Insurance	\$
Comprehensive Automobile Liability Insurance	\$
Automobile Medical Payments Insurance	\$
Garage Insurance	\$
Uninsured Motorists Insurance	\$
Automobile Physical Damage Insurance	\$
Automobile Physical Damage Insurance Dealers	\$
	\$
	\$
	\$
Comprehensive General Liability Insurance	\$ 979,860
Owners', Landlords' and Tenants' Liability Insurance	\$
Manufacturers' and Contractors' Liability Insurance	\$
Comprehensive Personal Insurance	\$
Farmer's Comprehensive Personal Insurance	\$
Contractual Liability Insurance	\$
Premises Medical Payments Insurance	\$
Owners' and Contractors' Protective Liability Insurance	\$
Personal Injury Liability Insurance	\$
	\$
	\$
	\$
	\$
<b>Deposit Premium</b>	<b>636,298</b>
<b>Total Advance Premium for this policy</b>	<b>\$ 1,616,158</b>

Form numbers of endorsements forming a part of the policy on its effective date:

ium is payable: On effective date of policy \$ \_\_\_\_\_ ; 1st Anniversary \$ \_\_\_\_\_ ; 2nd Anniversary \$ \_\_\_\_\_

Declarations page shall not be binding on the company unless countersigned by a duly authorized representative of the company, and attached, as required, to Section One of the company's Liability Insurance Policy, and completed by one or more Coverage Parts for which there is an advance premium indicated on this page.

Countersigned by.

6625 CSRL C

# EXHIBIT G

**ROBERT GALARDI AFFIDAVIT IN SUPPORT OF THE CONTINENTAL INSURANCE COMPANY'S  
RESPONSE IN OPPOSITION TO FREEPORT-MCMORAN COPPER & GOLD, INC.'S MOTION TO  
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AL.***

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CBM-IPG\SF407339.1



# EXHIBIT H

**ROBERT GALARDI AFFIDAVIT IN SUPPORT OF THE CONTINENTAL INSURANCE COMPANY'S  
RESPONSE IN OPPOSITION TO FREEPORT-MCMORAN COPPER & GOLD, INC.'S MOTION TO  
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CBM-IPG\SF407339.1

The Company hereby states that it has issued to the insured named in this certificate a policy of which this certificate is a copy. This certificate is not a policy of insurance. It is a memorandum of the policy referred to herein at the date of issue hereof and is furnished as a matter of information only, with the understanding that the rights and liabilities of the parties will be governed by the original policy as it may be lawfully amended from time to time. This certificate is incomplete unless attached, when furnished to the holder, to Section One of the Company's Liability Insurance Policy.

# EXHIBIT I

**ROBERT GALARDI AFFIDAVIT IN SUPPORT OF THE CONTINENTAL INSURANCE COMPANY'S  
RESPONSE IN OPPOSITION TO FREEPORT-MCMORAN COPPER & GOLD, INC.'S MOTION TO  
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CBM-IPG\SF407339.1



# EXHIBIT J

**ROBERT GALARDI AFFIDAVIT IN SUPPORT OF THE CONTINENTAL INSURANCE COMPANY'S  
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**IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF NEW YORK  
CIVIL ACTION NO. 08 CV 02012**

CBM-IPG\SF407339.1



3 34 74 18

581 3 34 44 12

The named insured is:  
 Individual ☐ Partnership ☐ Corporation ☒  
 Joint Venture ☐  
 Other (specify) \_\_\_\_\_

Business of the named insured is:  
**Mining, Smelting and Refining**

**Audit period.** Annual, unless otherwise stated.

**Audit Required**  
☒ Yes      ☐ No

Item 3. The insurance afforded is only with respect to such of the following Coverage Parts as are indicated by specific premium charge or charges.

Coverage Parts	Advance Premiums
Basic Automobile Liability Insurance	\$
Comprehensive Automobile Liability Insurance	\$
Automobile Medical Payments Insurance	\$
Garage Insurance	\$
Uninsured Motorists Insurance	\$
Automobile Physical Damage Insurance	\$
Automobile Physical Damage Insurance (Dealers)	\$
	\$
	\$
	\$
Comprehensive General Liability Insurance	\$ 453,533
Owners', Landlords' and Tenants' Liability Insurance	\$
Manufacturers' and Contractors' Liability Insurance	\$
Comprehensive Personal Insurance	\$
Farmer's Comprehensive Personal Insurance	\$
Contractual Liability Insurance	\$
Premises Medical Payments Insurance	\$
Owners' and Contractors' Protective Liability Insurance	\$
Personal Injury Liability Insurance	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total Advance Premium for this policy	\$ 453,533
	\$ 3312,034.

Tab. 7-251 (8), L5688B, L7189A, GL2119, GL2006, LB199, L6817A, L5688B, L7104A, L7165C

premium is payable On 8-23-86 Date of policy \$ ; 1st Anniversary \$ ; 2nd Anniversary \$

**Countersigned by**

**COPY**